



FH  
[REDACTED]

**STATE OF WISCONSIN**  
**Division of Hearings and Appeals**

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In the Matter of

[REDACTED]  
[REDACTED]  
[REDACTED]

DECISION

CWA/166714

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**PRELIMINARY RECITALS**

Pursuant to a petition filed June 17, 2015, under Wis. Admin. Code § HA 3.03, to review a decision by the Bureau of Long-Term Support in regard to Medical Assistance, a hearing was held on July 21, 2015, at Milwaukee, Wisconsin.

There is no issue for determination at this time.

There appeared at that time and place the following persons:

**PARTIES IN INTEREST:**

Petitioner:

[REDACTED]  
[REDACTED]  
[REDACTED]

Respondent:

Department of Health Services  
1 West Wilson Street, Room 651  
Madison, Wisconsin 53703

By: Carrie Haugen

Bureau of Long-Term Support  
1 West Wilson

Madison, WI

**ADMINISTRATIVE LAW JUDGE:**

Debra Bursinger  
Division of Hearings and Appeals

**FINDINGS OF FACT**

1. Petitioner (CARES # [REDACTED]) is a resident of Milwaukee County.
2. On June 16, 2015, the IRIS agency issued a Notice of Action to the Petitioner informing him of the program's intent to disenroll him from the IRIS program effective June 30, 2015 due to a determination that the program could not assure his health and safety.

3. On June 18, 2015, the Petitioner filed an appeal with the Division of Hearings and Appeals.
4. On June 19, 2015, the Petitioner voluntarily disenrolled from the program. The IRIS program processed his voluntary disenrollment to be effective June 30, 2015. A letter regarding the voluntary disenrollment was issued to the Petitioner on June 24, 2015.
5. Effective July 1, 2015, the Petitioner was enrolled in the Family Care program.

### **DISCUSSION**

The IRIS program was developed pursuant to a Medical Assistance waiver obtained by the State of Wisconsin, pursuant to section 6087 of the Deficit Reduction Act of 2005 (DRA), and section 1915(j) of the Social Security Act. It is a self-directed personal care program. IRIS policies are found online at <https://www.dhs.wisconsin.gov/publications/p0/p00708.pdf>. Wisconsin IRIS policies allow the program to end a participant's enrollment when the participant's health and safety is at risk. Id.

IRIS is one Medical Assistance waiver program. Other programs include Family Care and Partnership/PACE. An individual can be enrolled only in one waiver program. IRIS is available to Family Care members if the member requests to change to IRIS and is disenrolled from the Family Care program. Counseling about the best option for an individual is available through local ADRCs. Petitioner testified at the hearing that he enrolled in Family Care but he would rather be enrolled in IRIS. He stated that he had completed and submitted an IRIS application two weeks prior to the hearing. However, as of the date of the hearing, he is still enrolled in Family Care.

Petitioner was advised at the hearing that he needs to meet with a case manager and/or counselor at an ADRC to determine the program that best fits his current needs.

Because the Petitioner voluntarily disenrolled from IRIS and is currently enrolled in the Family Care program, there is no issue for me to determine at this time. If the Petitioner wants to enroll in IRIS and his application is denied or other adverse action is taken, he can appeal that determination.

### **CONCLUSIONS OF LAW**

There is no issue for determination.

**THEREFORE, it is**

**ORDERED**

That the Petitioner's appeal is dismissed.

### **REQUEST FOR A REHEARING**

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision**. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

### APPEAL TO COURT

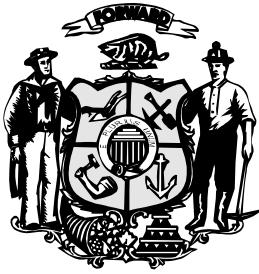
You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, Madison, Wisconsin 53703, **and** on those identified in this decision as “PARTIES IN INTEREST” **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Milwaukee,  
Wisconsin, this 11th day of September, 2015

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\sDebra Bursinger  
Administrative Law Judge  
Division of Hearings and Appeals



**State of Wisconsin\DIVISION OF HEARINGS AND APPEALS**

Brian Hayes, Administrator  
Suite 201  
5005 University Avenue  
Madison, WI 53705-5400

Telephone: (608) 266-3096  
FAX: (608) 264-9885  
email: [DHAmail@wisconsin.gov](mailto:DHAmail@wisconsin.gov)  
Internet: <http://dha.state.wi.us>

The preceding decision was sent to the following parties on September 11, 2015.

Bureau of Long-Term Support